



APPLICATION FOR MECHANICAL PERMIT # _____
ELECTRICAL – HVAC – PLUMBING - REFRIGERATION
INSPECTIONS/ DEVELOPMENT PLANS/ PERMITS
SUITE 101
WAVERLY F. AKINS OFFICE BUILDING
P.O. BOX 550
RALEIGH, NC 27602
PHONE: (919) 856-6060
FAX: (919) 856-6229

Type of work to be performed: New ☐ Addition ☐ Repair/Replacement ☐ Manufactured Home ☐

Project Street Address:		City:
Subdivision:	Lot #	Pin #
Building Owner:		Phone #
Owners Address:		City:
Contact Name:	Contact Email Address:	Phone #

Directions to site:

Project includes the following work: Electrical ☐ HVAC ☐ Plumbing ☐ Refrigeration ☐

Description of Work:

Electrical Contractor:	License #
Street Address:	City/State:
HVAC Contractor:	License #
Street Address:	City/State
Plumbing Contractor:	License #
Street Address:	City/State
Refrig. Contractor:	License #
Street Address:	City/State:

Trade	Contract Cost	Permit Fee
Electrical		
HVAC		
Plumbing		
Refrigeration		
TOTAL		

Applicants Signature: _____

Processed By: _____

Approved by: _____

Date: _____ Receipt # _____

Work shall comply with the North Carolina State Building Codes and all other applicable state and local laws, ordinances and regulations. This application becomes a permit only when it has been signed and approved by Wake County Inspections.